UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA GREENVILLE DIVISION

IN RE:	CHAPTER 11	
CAH ACQUISTION COMPANY #12, LLC d/b/a FAIRFAX COMMUNITY HOSPITAL	CASE NO: 19-01697-5-JNC	
DEBTOR	Check if this is an amended filing	
	CORPORATE DEBTOR IN	
POSSESSIC	<u>ON/TRUSTEE</u>	
DATE PETITION WAS FILED: April 1, 2019		
REPORTING PERIOD COVERED: June	e 1, 2019 - June 30, 2019	
I declare under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge and belief:		
DEBTOR:		
Officer Name & Title: Thomas W. Waldre	ep, Jr., Trustee	
Date: 8/9/19	_6.	
Signature: s/Thomas W. Waldrep, Jr.		
I have read the information in this report and the to the best of my knowledge and belief:	e information contained herein is true and correct	
ATTORNEY FOR TRUSTEE:		
	0/0/40	
Printed Name: <u>Jason L. Hendren</u>	Date: <u>8/9/19</u>	
Signature: s/ Jason L. Hendren		

PART A: BUSINESS OPERATIONS

I.	Summary	01	Business	Operations:

1.	Summary of Business Operations.
	1.) Please summarize the Debtor's business activities for the month:
Since the hospital	On April 12, 2019, the Court appointed Thomas W. Waldrep, Jr. as Chapter 11 Trustee. that time, the Trustee has been working with counsel to determine his options regarding the al.
	2.) Did the Debtor operate with a cash surplus or cash loss for the month? If the Debtor operated at a loss, please explain what affected profitability:
	The Debtor operated with a cash loss for the month.
	3.) Did the Debtor have any significant receipts or disbursements this month that were unusual or do not reoccur every month? For example, receipts would include insurance claim proceeds, tax refunds and funds from sale proceeds. Disbursements would include annual or quarterly insurance premiums, tax payments, large repairs, etc.:
	(a) RECEIPTS –
	None
	(b) DISBURSEMENTS –
	None

II. Summary of Chapter 11 Activities:

	1.) Were any transactions this month outside of the ordinary course of business? For example, did the Debtor sell any property, receive a loan from a third party or make any large purchases? If yes, please describe:	
	None	
	2.) What steps has the Debtor taken toward reorganization or liquidation?	
financi to eval	The Trustee hired various professionals in this cases including co-counsel, an accountant, a inancial consultant and special counsel to deal with regulatory issues. The Trustee is continuing a evaluate his options regarding reorganization. Further, the Trustee has employed Cohesive Management to operate the hospital.	

PART B: CERTIFICATIONS

1.)	Is the Debtor current on all post-petition tax obligations? Yes No If the Debtor checked <u>no</u> , please complete the chart below:		
	Name of Taxing Authority	Amount Of Taxes Owed	
2.)	Has the Debtor filed all necessary tax forms (e.g., 10 the petition date? Yes No * This information is		
	If the Debtor checked <u>no</u> , please provide information currently unfiled:	n regarding the tax forms tha	t are
3.)	Is the Debtor current on all post-petition administration	ive expenses (excluding tax	
	obligations)? Yes No * This information is unknown to the Trustee at this time		
	If the Debtor checked <u>no</u> , please complete the chart below:		
	Name of Administrative Creditor	Amount Owed	

4.)	Are the Debtor's insurance policies in full force * This information is unknown to the Trustee at this time. If the Debtor checked no , please detail which p insured:	e	· <u>—</u>
5.)	Has the Debtor closed all pre-petition bank acc	ounts? Yes	✓ No
	If the Debtor checked <u>no</u> , please list the pre-per whether the Debtor sought Court approval to ke		
	Name of Banking Institution	Last 4 Digits of Account	Court Approval (Y/N)
	US Bank	4817	N
	US Bank	3952	N
	Armstrong Bank	9447	N
	Armstrong Bank	0053	N
6.)	Did the Debtor pay any pre-petition unsecured If the Debtor checked <u>yes</u> , please complete the Name of Unsecured Creditor	e chart below:	ting period? Yes 1

7.)	Did the Debtor deposit all sources of income into its DIP bank accounts this reportion period? Yes No		
	If the Debtor checked <u>no</u> , please detail where the estate fundamented, how the funds were disbursed:	nds were deposited, or (if no	
	The Debtor's income was deposited into US Bank #395	2.	
8.)	Did the Debtor pay any professionals (e.g., attorney or acco	ountant) without prior Court	
	approval this reporting period? Yes V No		
	If the Debtor checked <u>yes</u> , please complete the chart below:		
	Name of Professional	Amount Paid	
		1	
9.)	Did the Debtor sell or transfer any property outside of the o	rdinary course of business	
	without prior Court approval during this reporting period?	Yes V No	
	If the Debtor checked <u>yes</u> , please provide additional inform that was sold or transferred:	ation regarding the property	

10.) Did any person or entity pay any expenses or costs on behalf of the Debtor during this
reporting period? Yes No
If the Debtor checked <u>yes</u> , please list all expenses paid on behalf of the Debtor, including the name of the person or entity who made the payments:
Yes, Cohesive Management paid the operating expenses of the Debtor. Cohesive's accounting is included in this report.
11.) Did the Debtor transfer any property to or for the benefit of an officer or insider of the
Debtor, or a relative of an officer or insider of the Debtor during the reporting period
(a transfer includes, but is not limited to, the payment of personal expenses, provision of
non-court approved fringe benefits, purchase of items for a personal non-business
purpose)?
If the Debtor checked <u>ves</u> , please list all expenses or costs the Debtor paid on behalf of any officer or insider of the Debtor, or on behalf of a relative of an officer or insider of the Debtor:

PART C: SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

NA	Tax Account (Last	t (Last 4 Digits:) 4 Digits:) ast 4 Digits:)
	Trustee's Account	(Last 4 Digits: <u>5033</u>) AMOUNT:
		AMOUNT.
1.	CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>30,557.58</u>
2.	TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	\$ <u>403,522.33</u>
3.	TOTAL DISBURSEMENTS/TRANSFERS/UNCLEAR [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	RED: \$ 295,120.84
4.	ENDING RECONCILED BALANCE:	\$ <u>138,959.07</u>
	SUMMARY OF BANK ACCOUNT INF	ORMATION
5.	ENDING BANK BALANCE:	\$ <u>138,959.07</u>
6.	PLUS UNCLEARED DEPOSITS	\$ <u>0.00</u>
7.	LESS UNCLEARED CHECKS	\$ <u>0.00</u>
8.	ENDING RECONCILED BALANCE:	*\$ <u>138,959.07</u>

DESCRIPTION/ITEMIZATION OF <u>RECEIPTS</u> (Last 4 Digits of Acct # <u>5033</u>)

RECEIPTS:	AMOUNT:
Sales	\$
Rental Income	\$
Collection of post-petition accounts receivable	\$
Collection of pre-petition accounts receivable	\$
Borrowing by Debtor (list sources below):	(list amounts below):
(a)	(a)
(a) (b) DIP Funding from Cohesive	(a) (b) \$ 343,039.81 (c)
(c)	(C)
	Total = \$ 343,039.81
Transfers from other accounts (list last 4 digits of account numbers below):	(list amounts below):
(a) 3952	(a) <u>\$ 60,482.52</u>
(a) 3952 (b) (c)	(a) \$ 60,482.52 (b) (c)
(c)	(c)
	Total = \$ 60,482.52
Other forms of income/deposits (list sources below):	(list amounts below):
(2)	(a)
(a)(b)	(b) (c)
(b) (c)	
	Total = \$ 0.00
Less allowance for returns and discounts	\$

→	*TOTAL =	\$ 403,522.33	
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EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 5033)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$
Officer Compensation	\$
Subcontractors and Contract Workers	\$
Payroll Taxes	\$
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$11,408.15
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(2) 1670	(a) \$ 178,166.92
(a) 1679 (b) 5496	(b) \$ 103,242.72
(b) 5496 (c)	(c)
	Total - \$ 201 400 64
Other (DDOVIDE ATTACIMENT)	Total = \$281,409.64
Other (PROVIDE ATTACHMENT)	\$2,303.05

→ *TOTAL = \$ 295,120.84
→ *TOTAL = \$ 295,120.84

^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

Other Expenses CAH #12

Account 5033:

6/12/19: KC Telco: \$2135.05

6/12/19: CT Lien Solutions for UCC Search: \$168.00

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

NATURE/TYPE OF ACCOUNT: Operating Account Tax Account (Last Payroll Account (I		·
	✓ US Bank Account	(Last 4 Digits: <u>3952</u>)
		AMOUNT:
1.	CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>58,979.46</u>
2.	TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	\$ <u>2,838.06</u>
3.	TOTAL DISBURSEMENTS/TRANSFERS/UNCLEAR [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	RED: \$ 60,482.52
4.	ENDING RECONCILED BALANCE:	\$ <u>1,335.00</u>
	SUMMARY OF BANK ACCOUNT INF	<u>ORMATION</u>
5.	ENDING BANK BALANCE:	\$ <u>1,335.00</u>
6.	PLUS UNCLEARED DEPOSITS	\$ <u>0.00</u>
7.	LESS UNCLEARED CHECKS	\$ <u>0.00</u>
8.	ENDING RECONCILED BALANCE:	*\$ <u>1,335.00</u>

^{*}If item #4 differs from Item #8, please explain:

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acct#3952)

AMOUNT:
\$
\$
\$
\$2,330.56
(list amounts below): (a)
(a) (b) (c)
Total = \$ 0.00
(list amounts below):
(a) (b) (c)
Total = \$ 0.00
(list amounts below):
(a) <u>\$ 507.50</u> (b)
Total = \$507.50
\$

→	*TOTAL =	\$ 2,838.06	
_	101710	Ψ 24,05,000	

EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 3952)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$
Officer Compensation	\$
Subcontractors and Contract Workers	\$
Payroll Taxes	\$
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(2) 5033	(a) \$ 60,482.52
(a) <u>5033</u> (b)	(b) (c)
(c)	(c)
	Total = \$60,482.52
Other (PROVIDE ATTACHMENT)	\$
	Ψ

*TOTAL = \$60,482.52	*TOTAL = \$ 60,482.52
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^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

	ATURE/TYPE OF ACCOUN	= ' "	(Last 4 Digits:)
The Trustee is working with US Bank to get a June statement for this account.		Tax Account (Last	
		US Bank Account	<u> </u>
			AMOUNT:
1.	CASH BALANCE FROM MONTH'S REPORT:	I PREVIOUS	\$ <u>4,499.50</u>
2.	TOTAL RECEIPTS/TRADE [On following page- <i>EXH</i> - provide a description of the second s	IBIT 1	\$ <u>0.00</u>
3.	TOTAL DISBURSEMEN [On following page- <i>EXH</i> - provide a description of the second seco		ED: \$ <u>0.00</u>
4.	ENDING RECONCILED	BALANCE:	\$ <u>4,499.50</u>
	SUMMARY	OF BANK ACCOUNT INFO	ORMATION
5.	ENDING BANK BALAN	CE:	\$ <u>4,499.50</u>
6.	PLUS UNCLEARED DE	POSITS	\$ 0.00
7.	LESS UNCLEARED CHI	ECKS	\$ <u>0.00</u>
	ENDING RECONCILED	DALANICE.	*\$ 4,499.50

^{*}If item #4 differs from Item #8, please explain:

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acct #4817)

RECEIPTS:	AMOUNT:
Sales	\$
Rental Income	\$
Collection of post-petition accounts receivable	\$
Collection of pre-petition accounts receivable	\$
Borrowing by Debtor (list sources below):	(list amounts below):
(a)	(a)
	Total = \$ 0.00
Transfers from other accounts (list last 4 digits of account numbers below):	(list amounts below):
(a)	(a)
(a) (b)	(b)
(c)	(c)
Other forms of income/deposits (list sources below):	(list amounts below):
(a)	(a)
(b)	(b) (c)
(c)	Total = \$ 0.00
Less allowance for returns and discounts	\$

→	*TOTAL =	\$ 0.00
_	IOII	Ψ 0.00

EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 4817)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$
Officer Compensation	\$
Subcontractors and Contract Workers	\$
Payroll Taxes	\$
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(a)	(a)
(a)	(a) (b) (c)
(b)(c)	(c)
(*)	T. 1. 22.22
	Total = \$ 0.00
Other (PROVIDE ATTACHMENT)	\$

→	*TOTAL = \$0.00
	101AL - \$ 0.00

^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

NATURE/TYPE OF ACCOUNT: Operating Account Tax Account (Last of Payroll		4 Digits:)
	Armstrong Bank A	cct (Last 4 Digits: <u>0053</u>)
		AMOUNT:
1.	CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>7,067.80</u>
2.	TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	
3.	TOTAL DISBURSEMENTS/TRANSFERS/UNCLEAR [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	ED: \$ <u>0.00</u>
4.	ENDING RECONCILED BALANCE:	\$ <u>8,861.98</u>
	SUMMARY OF BANK ACCOUNT INFO	ORMATION
5.	ENDING BANK BALANCE:	\$ <u>8,861.98</u>
6.	PLUS UNCLEARED DEPOSITS	\$ <u>0.00</u>
7.	LESS UNCLÉARED CHECKS	\$ <u>0.00</u>
8.	ENDING RECONCILED BALANCE:	*\$ <u>8,861.98</u>
	*If item #4 differs from Item #8, please explain:	

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acet # 0053)

RECEIPTS:	AMOUNT:
Sales	\$
Rental Income	\$
Collection of post-petition accounts receivable	\$
Collection of pre-petition accounts receivable	\$
Borrowing by Debtor (list sources below):	(list amounts below):
(a)	(a) (b)
(b) (c)	(b) (c)
	Total = \$ 0.00
Transfers from other accounts (list last 4 digits of account numbers below):	(list amounts below):
(a)	(a)
(a) (b) (c)	(b)
(6)	(c) Total = \$ 0.00
	10121 – \$ 0.00
Other forms of income/deposits (list sources below):	(list amounts below):
,	(a) \$ 1,794.18
(a) US Treasury	(a) \$ 1,794.18 (b) (c)
(b)	(c)
	Total = \$1,794.18
Less allowance for returns and discounts	\$

→	*TOTAL =	\$ 1,794.18	
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EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acet # <u>0053</u>)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$
Officer Compensation	\$
Subcontractors and Contract Workers	\$
Payroll Taxes	\$
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
	(a)
(a)	(a) (b)
(b)	(c)
(c)	
	Total = \$0.00
Other (PROVIDE ATTACHMENT)	\$

\rightarrow *TOTAL = \$ 0.00

^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

Tax Account (Last 4 D Payroll Account (Last	rigits:)
	AMOUNT:
CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>996.01</u>
TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	\$ <u>0.00</u>
TOTAL DISBURSEMENTS/TRANSFERS/UNCLEARED [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	: \$ <u>0.00</u>
ENDING RECONCILED BALANCE:	\$ <u>996.01</u>
SUMMARY OF BANK ACCOUNT INFOR	<u>MATION</u>
ENDING BANK BALANCE:	\$ <u>996.01</u>
PLUS UNCLEARED DEPOSITS	\$ <u>0.00</u>
LESS UNCLEARED CHECKS	\$ <u>0.00</u>
ENDING RECONCILED BALANCE: *	\$ <u>996.01</u>
	Tax Account (Last 4 D Payroll Account (Last √ Armstrong Bank Acct CASH BALANCE FROM PREVIOUS MONTH'S REPORT: TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- EXHIBIT 1 - provide a description of the source and amount] TOTAL DISBURSEMENTS/TRANSFERS/UNCLEARED [On following page- EXHIBIT 2 - provide a description of the disbursements] ENDING RECONCILED BALANCE: SUMMARY OF BANK ACCOUNT INFOR ENDING BANK BALANCE: PLUS UNCLEARED DEPOSITS LESS UNCLEARED CHECKS

*If item #4 differs from Item #8, please explain:

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acct # 9447)

AMOUNT:
\$
\$
\$
\$
(list amounts below):
(a)
(b) (c)
Total = \$ 0.00
(list amounts below):
(a)
(b)
(c)
Total = \$ 0.00
(list amounts below):
(a)
(b)
(c)
Total = \$ 0.00
\$

\rightarrow *TOTAL = \$ 0.00	
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EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 9447)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$
Officer Compensation	\$
Subcontractors and Contract Workers	\$
Payroll Taxes	\$
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(a)	(a)
(a)	(0)
(b)	(c)
(0)	
	Total = \$ 0.00
Other (PROVIDE ATTACHMENT)	\$

\rightarrow *TOTAL = \$ 0.00	
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^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

NA	TURE/TYPE OF ACCOUNT: Operating Account (I Tax Account (Last 4 I Payroll Account (Last	Digits:)
	Cohesive's Account	(Last 4 Digits: <u>1679</u>)
		AMOUNT:
1.	CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>94,430.44</u>
2.	TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	\$ <u>199,294.86</u>
3.	TOTAL DISBURSEMENTS/TRANSFERS/UNCLEARED [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	0: \$ <u>298,844.60</u>
4.	ENDING RECONCILED BALANCE:	\$ <u>(5,119.30)</u>
	SUMMARY OF BANK ACCOUNT INFOR	RMATION
5.	ENDING BANK BALANCE:	\$ <u>72,013.56</u>
6.	PLUS UNCLEARED DEPOSITS	\$ <u>0.00</u>
7.	LESS UNCLEARED CHECKS	\$ <u>77,132.86</u>
8.	ENDING RECONCILED BALANCE:	\$ <u>(5,119.30)</u>

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acet # 1679)

RECEIPTS:	AMOUNT:
	,
Sales	\$
Rental Income	\$
Collection of post-petition accounts receivable	\$5,607.16
Collection of pre-petition accounts receivable	\$1,968.06
Borrowing by Debtor (list sources below): (a) (b) (c)	(list amounts below): (a) (b) (c)
	Total = \$ 0.00
Transfers from other accounts (list last 4 digits of account numbers below): (a) 5033 (b) (c)	(list amounts below): (a) \$ 191,719.64 (b)
	Total = \$ 191,719.64
Other forms of income/deposits (list sources below): (a) (b) (c)	(list amounts below): (a) (b) (c) Total = \$ 0.00
Less allowance for returns and discounts	\$

→	*TOTAL =	\$ 199,294.86	

EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 1679)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$130,287.30
Officer Compensation	\$
Subcontractors and Contract Workers	\$14,277.95
Payroll Taxes	\$84,535.24
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$20,366.60
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$5,987.64
Utilities (Telephone, Electricity, Water, Other)	\$4,419.25
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$25,603.53
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$9,365.95
Office Supplies	\$1,464.28
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(a)	(a)
(a)	(a) (b) (c)
(b)(c)	(c)
(6)	Total = \$ 0.00
Other (PROVIDE ATTACHMENT)	\$2,536.86

→	*TOTAL = \$ 298,844.60	
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^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

SUMMARY OF CASH RECEIPTS AND DISBURSEMENTS

NA	TURE/TYPE OF ACCOUNT: Operating Account (Last	t (Last 4 Digits:)
		Last 4 Digits: 5496)
		ccount (Last 4 Digits:)
		AMOUNT:
1.	CASH BALANCE FROM PREVIOUS MONTH'S REPORT:	\$ <u>82.20</u>
2.	TOTAL RECEIPTS/TRANSFERS/UNCLEARED: [On following page- <i>EXHIBIT 1</i> - provide a description of the source and amount]	\$ <u>104,242.72</u>
3.	TOTAL DISBURSEMENTS/TRANSFERS/UNCLEAR [On following page- <i>EXHIBIT 2</i> - provide a description of the disbursements]	RED: \$ 103,266.27
4.	ENDING RECONCILED BALANCE:	\$ <u>1,058.65</u>
	SUMMARY OF BANK ACCOUNT INF	FORMATION
5.	ENDING BANK BALANCE:	\$ <u>1,058.65</u>
6.	PLUS UNCLEARED DEPOSITS	\$
7.	LESS UNCLEARED CHECKS	\$
8.	ENDING RECONCILED BALANCE:	*\$ <u>1,058.65</u>
	*If item #4 differs from Item #8, please explain:	

DESCRIPTION/ITEMIZATION OF RECEIPTS (Last 4 Digits of Acct #5496)

RECEIPTS:	AMOUNT:
Sales	\$
Rental Income	\$
Collection of post-petition accounts receivable	\$
Collection of pre-petition accounts receivable	\$
Borrowing by Debtor (list sources below): (a) (b) (c)	(list amounts below): (a) (b) (c) Total = \$ 0.00
Transfers from other accounts (list last 4 digits of account numbers below):	(list amounts below):
(a) <u>5033</u>	(a) \$ 103,242.72
(a) <u>5033</u> (b)	(b) (c)
	Total = \$ 103,242.72
Other forms of income/deposits (list sources below):	(list amounts below): (a) \$ 1,000.00
(a) Cohesive Personnel	(b) (c)
(b)(c)	
	Total = \$ 1,000.00
Less allowance for returns and discounts	\$

→	*TOTAL =	\$ 104,242.72	

EXHIBIT 2

DESCRIPTION/ITEMIZATION OF <u>DISBURSEMENTS</u> (Last 4 Digits of Acct # 5496)

DISBURSEMENTS:	AMOUNT:
Payments to Secured Creditors	\$
Purchases of Inventory	\$
Net Payroll (excluding officer compensation)	\$58,846.94
Officer Compensation	\$
Subcontractors and Contract Workers	\$516.93
Payroll Taxes	\$30,301.15
Sales Tax	\$
Property Taxes	\$
Supplies and Materials	\$
Real Property Lease Payments	\$
Vehicle & Equipment Lease Payments	\$
Utilities (Telephone, Electricity, Water, Other)	\$
Travel and Entertainment	\$
Meal and Food Costs	\$
Transportation Costs (e.g., fuel, tolls, parking)	\$
Vehicle Maintenance and Repairs Costs	\$
Equipment Repair Costs	\$
Real Property Repairs and Maintenance Costs	\$
Vehicle Insurance Premiums	\$
Life and Health Insurance Premiums	\$
Real Property Insurance Premiums	\$
Other Insurance Premiums	\$
Office Supplies	\$
Freight and Shipping Costs	\$
Advertising and Marketing	\$
Professional Fees (e.g., Attorney, Accountant)	\$
Quarterly Fees	\$
Transfers to other accounts (list last 4	(list amounts below):
digits of account numbers below):	
(a) 1670	(a) § 13,552.72
(a) 1679	(b)
(b)	(b) (c)
(0)	
	Total = \$13,552.72
Other (PROVIDE ATTACHMENT)	\$48.55

→ :	*TOTAL = \$ 103,266.29
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^{*}Total equals item #3 (Total Cash Disbursements) on Part C.

PART D: SUMMARY OF ACCOUNT RECEIVABLES

		AMOUNT :
1.	Beginning Balance	\$
2.	Sales on Account	\$
3.	Collections on Account	\$
4.	Ending Balance [Item #1 plus #2 minus #3]	\$

STATUS OF COLLECTIONS:

	AMOUNT:
Current to 30 days	\$
31 to 60 days	\$
61 to 90 days	\$
91 to 120 days	\$
121 days and older	\$
TOTAL:	\$

The Debtor's accounts receivable is unknown to the Trustee at the time of this report.

PART E: SUMMARY OF ACCOUNTS PAYABLE

[EXCLUDING PRE-PETITION ACCOUNTS PAYABLE]

	<u>AMOUNT</u> :
Current to 30 days	\$
31 to 60 days	\$
61 to 90 days	\$
91 to 120 days	\$
121 days and older	\$
TOTAL:	\$ 0.00

If there are payables outstanding greater than 60 days, please provide an explanation:

Click to add Secured Creditors

PART F: STATUS OF PAYMENTS TO SECURED CREDITORS

Instructions: List all secured creditors and collateral descriptions, regardless if payments are made

Creditor Name:	HMC/CAH Note Acquisition, LLC
Description of Collateral:	Blanket Lien
Amount Paid this Month:	\$ 0.00
Payment Pursuant to Bankruptcy Court Order?	No .
Creditor Name:	GEL Funding, LLC
Description of Collateral:	Blanket Lien
Amount Paid this Month:	\$ 0.00
Payment Pursuant to Bankruptcy Court Order?	No
Creditor Name:	
Description of Collateral:	
Amount Paid this Month:	
Payment Pursuant to Bankruptcy Court Order?	
Creditor Name:	
Description of Collateral:	
Amount Paid this Month:	
Payment Pursuant to Bankruptcy Court Order?	

Click to add Lessors

PART G: STATUS OF PAYMENTS TO LESSORS

Instructions: List all lessors and description of leased property, regardless if payments are made

Check if this form is not applic	eable to the Debtor
Lessor Name:	Gene Evans
Description of Leased Property:	RHC #2 Rent
Amount Paid this Month:	\$ 1,000.00
Is Lease Current?	Unknown
Lessor Name:	Dock & Lock Storage
Description of Leased Property:	Rent
Amount Paid this Month:	\$ 57.50
Is Lease Current?	Unknown
Lessor Name:	Tri-Tec Medical
	Tri-Tec Medical Telemetry Rental
Lessor Name: Description of Leased Property: Amount Paid this Month:	Telemetry Rental
Description of Leased Property:	
Description of Leased Property: Amount Paid this Month:	Telemetry Rental \$ 1,359.38
Description of Leased Property: Amount Paid this Month: Is Lease Current?	Telemetry Rental \$ 1,359.38 Unknown
Description of Leased Property: Amount Paid this Month: Is Lease Current? Lessor Name:	Telemetry Rental \$ 1,359.38 Unknown Beckman Coulter
Description of Leased Property: Amount Paid this Month: Is Lease Current? Lessor Name: Description of Leased Property:	Telemetry Rental \$ 1,359.38 Unknown Beckman Coulter Lab Equipment

Click to add Lessors

STATUS OF PAYMENTS TO LESSORS

Lessor Name:	Auto Clor Services
Description of Leased Property:	Dishwasher Machine
Amount Paid this Month:	\$ 342.67
Is Lease Current?	Unknown
Lessor Name:	
Description of Leased Property:	
Amount Paid this Month:	
Is Lease Current?	
Lessor Name:	
Description of Leased Property:	
Amount Paid this Month:	
Is Lease Current?	
Lessor Name:	
Description of Leased Property:	
Amount Paid this Month:	
Is Lease Current?	
Lessor Name:	
Description of Leased Property:	
Amount Paid this Month:	
Is Lease Current?	

PART H: SUMMARY OF OFFICER/OWNER COMPENSATION, PROPERTY SALES AND PROFESSIONAL FEE PAYMENTS

ame of Officer/Owner of the Debtor	Monthly Con Authorized by		Compensation Received this Month
PROPERTY SALE REPORT:			
Check if the Debtor did not sell any p	property this month	1	
Description of Property Sold	Date Property Sold	Gross Sale Proceeds	Net Sale Procee Paid to Debtor
REPORT OF ALL PAYMENTS MAI	DE TO PROFESS	IONALS THIS MO	ONTH:
	orofessionals this n	nonth	
Check if the Debtor did not pay any i	•	Compensation	Companyatio
Check if the Debtor did not pay any j	Data	· · · · · · · · · · · · · · · · · · ·	Compensatio
Check if the Debtor did not pay any positions of Professional	Date Compensation Approved	Authorized by the	ne Received thi Month

PART I: CHAPTER 11 QUARTERLY FEES

DISBURSEMENTS INCLUDE: Sum total of all disbursements from all of the Debtor's bank accounts – <u>and</u> – <u>payments made on behalf of the Debtor</u>. Disbursements do <u>not</u> include transfers between the Debtor's accounts. Quarterly fees are not prorated.

Calculating the Fee: Use the table on the following page to compute the Amount of Fee Due for each quarter. Payment of quarterly fees should be submitted to Debtor's attorney, and then Debtor's attorney should submit the payment through www.pay.gov.

2nd Quarter:					
	<u>Disbursements</u> made by Debtor		Disbursements made on behalf of Debtor		
Disbursements for April:	\$ 611.56	- +			
Disbursements for May:	\$ 0.00	+			
Disbursements for June:	\$ 402,269.37	. +			
<u>TOTAL</u> :	\$ 402,880.93	. +	\$ 0.00		
TOTAL DISBURSEMENTS: \$402,880.93					
Amount of Fee	Due: \$ 4,875.00	<u>) </u>			
Amount of Eac	Daid: \$ 4.975.00	\			

Total Disbursements for the Quarter	Amount of Fee Due		
\$0 to \$14,999.00	\$325.00		
\$15,000.00 to \$74,999.99	\$650.00		
\$75,000.00 to \$149,999.99	\$975.00		
\$150,000.00 to \$224,999.99	\$1,625.00		
\$225,000.00 to \$299.999.99	\$1,950.00		
\$300,000.00 to \$999,999.99	\$4,875.00		
Total disbursements are equal to or greater than \$1,000,000.00	1% of total disbursements or \$250,000.00, whichever is less		